

General Osteopathic Council review of osteopathic courses and course providers

MOst

Renewal of recognition review

Oxford Brookes University

April 2009

Foreword

Under the *Osteopaths Act 1993* the General Osteopathic Council (GOsC) is the statutory regulatory body for osteopaths and osteopathic education providers. The GOsC advises the Privy Council on which programmes of osteopathic education merit Recognised Qualification (RQ) status. The Privy Council grants RQ status to programmes where the governance and management of the course provider and the standards and quality of the programme meet the requirements laid down by the GOsC. In particular, students must meet the practice requirements of GOsC's *Standard 2000: Standard of Proficiency*.

Decisions concerning the granting, maintenance and renewal of RQ status are made by the Privy Council following reviews of osteopathic courses and course providers. The Quality Assurance Agency for Higher Education (QAA) manages certain aspects of these reviews on behalf of GOsC. The role of QAA, by its conduct throughout the UK of reviews and audits of higher education provision and providers, is to maintain public assurance that the standards and quality of higher education are being safeguarded and enhanced. In developing its methods for higher education audit and review, QAA has published a wide range of materials designed to provide a background against which scrutiny can take place.

GOsC review

GOsC review is a peer-review process. It starts when institutions evaluate their provision in a self-evaluation document. This document is submitted to QAA for use by a team of review 'visitors' who gather evidence to enable them to report their judgements on governance and management, the clinical and academic standards, and the quality of learning opportunities. Review activities include meeting staff and students, observing teaching and learning, scrutinising students' assessed work, reading relevant documents and examining learning resources. Full details of the process of GOsC review can be found in the *Handbook for the General Osteopathic Council review of osteopathic courses and course providers, second edition*, QAA 2005.

GOsC review may take one of three forms:

- review for the purpose of granting initial RQ status
- review for the purpose of renewal of RQ status

- review for the purpose of monitoring the operation of governance, management, standards and quality. Such 'monitoring review' normally explores the content of an annual report on provision, the fulfilment of conditions attached by the Privy Council to RQ status, or some important development in the provider or the osteopathic programme.

In initial recognition review, in renewal review, and in some instances of monitoring review, visitors make one of the following recommendations to GOsC:

- **approval without conditions**
- **approval with conditions**
- **approval denied.**

The recommendation made is that of the review visitors to the GOsC. In making its own recommendation to the Privy Council the GOsC may choose not to follow the recommendation of the visitors.

In some monitoring reviews the GOsC does not require the visitors to make a formal recommendation for the programme.

Introduction

This report presents the findings of a renewal of recognition review of aspects of governance and management, of the academic standards proposed, and of the quality of the learning opportunities proposed in osteopathy at Oxford Brookes University. The programme reviewed was the Master of Osteopathy (MOst). The review was undertaken by visitors appointed by the General Osteopathic Council (GOsC) in accordance with GOsC's regulatory responsibilities for safeguarding Recognised Qualification (RQ) criteria under the *Osteopaths Act 1993*. A prime focus of the review was the relationship of the programmes to the *Standard 2000: Standard of Proficiency (Standard 2000)* professional competence standard of the GOsC. The review was completed in the academic year 2008-09. The review visitors were Mr Simeon Milton, Mr Nicholas Woodhead, Professor Michael Thomas and Mr Peter Clarke (Review Coordinator).

The MOst was subject to an Initial Recognition Review in 2006 along with the BOst programme. The MOst gained approval subject to conditions for a period of three years from 2007, whilst the BOst gained approval subject to conditions for a period of five years. Students can commence the MOst programme only after successfully completing the first two years of the BOst programme. The first cohort of students was recruited in September 2007, and hence no students had commenced the MOst programme at the time of this renewal of recognition review. This means that the range of evidence available to the visitors was limited, as there were no students to meet, no student work to review and no classes to visit.

A Formal recommendations

The recommendation given below is the recommendation of the review visitors to the GOsC. In making its own recommendation to the Privy Council the GOsC may choose not to follow the recommendation of the visitors.

The recommendation of the visitors for the MOst programme is:

- **approval with conditions**

The conditions are:

- the University should pursue its plans to increase the number of patients below 16 years of age in time to support the specialist paediatric module in the final year commencing in September 2010
- the University should ensure the continuing development of osteopathy research within the Rehabilitation and Enablement Research group

B Findings

The following is a summary of the visitors' main conclusions:

Strengths

- the comprehensive management, reporting and monitoring processes which support effective governance and strategic planning (paragraph 2)
- the effective quality assurance processes within the School and University as demonstrated by the responses made to the Initial Recognition Review (paragraphs 8;14;)
- the high quality of the School's documentation, including the written guidance provided to students (paragraphs 11; 16; 17; 28)
- the overall design of the programme provides clear progression to Masters level study (paragraphs 11; 13)
- the assessment strategy which clearly links planned assessment, assessment criteria, intended learning outcomes and *Standard 2000* and supports students in the development of a range of relevant skills. (paragraphs 16; 17)

Areas for development:

- whilst the University's policy of integrating osteopathic research into the Rehabilitation and Enablement group addresses the risk of it becoming isolated, it is not clear that a research culture is fully embedded (Paragraph 29)
- the lack of patients under 16 years of age needs to be addressed to support the planned final level paediatric specialism (paragraph 37)

C Description of the review method

The following section gives a general description of the GOsC review method. The full method is given in the *Handbook for the General Osteopathic Council review of osteopathic courses and course providers, second edition*.

The GOsC review method combines off-site consideration of written evidence by the visitors with at least one visit of two days to the provider. For recognition and renewal review, the review period is typically of six weeks.

The visitors are selective in their lines of enquiry and focus on their need to arrive at findings and a recommendation against clearly stated criteria. They refine emerging views on the provision against as wide a range of evidence as possible. For example, the perceptions expressed in meetings by students or by staff are tested against other sources of evidence.

Documentary evidence typically used includes financial accounts, strategic plans, financial projections, insurance schedules, student work, clinic management records, internal reports from committees, boards and individual staff with relevant responsibilities; and external reports from examiners, verifiers, employers, validating and accrediting bodies.

Meetings with students are strictly confidential between the students attending and the visitors; no comments are attributed to individuals. Teaching and learning observation is governed by a written protocol.

Visitors respect the principle of proportionality in their enquiries and emerging conclusions.

Key features of GOsC review include:

- an emphasis on the professional competencies expected of osteopaths and expressed in GOsC's *Standard 2000*
- peer review: review teams include currently registered osteopaths and frequently at least one lay visitor with higher education interests
- a focus on the students' learning experience, frequently to include the observation by visitors of clinical and non-clinical teaching
- flexibility of process to minimise disruption to the provider; there is negotiation between QAA and the provider about the timings of the review and the nature of evidence to be shown
- a process conducted in an atmosphere of mutual trust; the visitors do not normally expect to find areas for improvement that the provider has not identified in its own self-evaluation document (SED)
- an emphasis on governance and management, to include the maintenance and enhancement of standards and quality
- use of the SED as the key document: this should have a reflective and evaluative focus
- an onus on the provider to supply all relevant information: any material identified in the SED should be readily available to visitors
- evidence-based judgements
- ensuring that the amount of time taken to conduct a review is the minimum necessary to enable visitors to reach robust findings and recommendations
- providing transparency of process through the use of published GOsC criteria

- the role of the Institutional Contact, a member of the provider's staff, to assist effective communication between the visitors and the provider
- the facility to engage a further specialist adviser where necessary
- close monitoring by QAA officers.

D The overall aims of the provider

The programme specification states that the programme aims to provide a high quality advanced undergraduate learning experience that enables students to develop a profile characterised by an enhanced level of competence in all areas of capability set out in *Standard 2000, Standard of Proficiency*, and which is consistent with the *QAA Framework for Higher Education Qualifications in England and Wales*. By virtue of this advanced undergraduate learning experience leading up to a Master of Osteopathy, students graduating from the programme will demonstrate high levels of capability in areas such as research and managing clinical uncertainty within specific specialist areas of professional practice. It is expected that these graduates will contribute to and promote an evidence-based culture within the osteopathic profession, and possess the required capabilities to facilitate the development and growth of the profession as a whole.

Intended learning outcomes within the programme specifications state that students graduating from the Master of Osteopathy (MOst) Advanced Undergraduate Full-time Programme will be able to:

- critically evaluate the theoretical basis of osteopathy
- demonstrate a well-developed broad range of osteopathic skills appropriate to the major areas of practice
- demonstrate developing osteopathic skills appropriate to specialist areas of osteopathic practice, which may require further development through appropriate professional training
- identify patients likely to benefit from osteopathy
- critically evaluate the role of osteopathic care in a variety specialist areas
- collect and evaluate information on the physical and psychosocial status of a patient
- critically evaluate the influence of cultural and environmental factors on patients
- synthesise the results of subjective and objective patient assessment techniques by means of highly developed clinical reasoning in order to plan appropriate osteopathic management
- select, implement and monitor osteopathic intervention by means of highly developed clinical reasoning in a manner that is safe, efficient and effective

- demonstrate highly developed decision-making processes required for complex and unpredictable clinical situations
- work collaboratively with the multidisciplinary members of healthcare provision in the UK
- communicate effectively and appropriately with patients, carers and members of the general public on matters of health awareness and health promotion
- critically evaluate and monitor your professional performance in order to identify and plan for continuing professional development needs
- undertake your own continuing professional development
- demonstrate well-developed skills of practice management and engage constructively in policy development and implementation within the profession and in health and social care
- demonstrate a comprehensive understanding of techniques applicable to research or advanced scholarship in osteopathy as a means of implementing and evaluating research projects
- critically evaluate current research and advanced scholarship in osteopathy and, where appropriate, propose new hypotheses that have the potential to inform your own research, your own practice and that of others

E Commentary on the provision

Management and governance: strategic

1. The MOst is located within the School of Health and Social Care which is one of eight Schools in the University. The Dean of the School is a member of the University Executive Board and chairs the School's Executive Board. The School has well developed and clear staff and committee structures, led by the Executive Board which meets frequently and devolves responsibility for the delivery of taught programmes to four directorates. It is further supported by the Head of Support Services, the Head of Finance and Contracts, and the Head of Communications Marketing. The osteopathic programmes are the responsibility of the Directorate of Pre-qualifying Learning and Development. There are clear lines of responsibility to the Director from the Osteopathy Programme Leader who has responsibility for the programme team, including the Clinical Education Co-ordinator. The School's Director of Research and Knowledge Transfer supports the Research Lead in Osteopathy.

2. The School's Annual Report to the GOsC is reviewed internally through the School Quality and Standards Committee and a report submitted to the School Executive. Action points and relevant issues are scrutinised by the University Academic Enhancement and Standards Committee while financial and resource requirements are overseen by the School Executive. Recommendations for action are communicated to the Director of Pre Qualifying Learning and Development and to the osteopathic team. The Visitors consider that these comprehensive management, reporting and monitoring processes support effective governance and strategic planning. The level of interest amongst current BOst students in pursuing the MOst, route indicates that the programme is viable.

3. One of the strategic aims of the programme team is to produce graduates who will contribute to and promote an evidence-based culture within the profession and possess the required capabilities to facilitate the development and growth of the profession as a whole. In support of this expectation, and in response to the Initial Recognition Review, the School has developed its research strategy to ensure that osteopathy is embedded in its planning.

4. The provision has developed its research base and currently has a member of staff heading its research growth and reporting to the Programme Leader and the School's Director of Research. The School Research Group has representatives from the osteopathic team and a number of inter-professional collaborations with colleagues from other subject areas investigating osteopathic themes. The number of osteopathic dissertation supervisors qualified to Masters level has risen to four to meet the expected research orientation within the MOst.

5. The School's Communications and Marketing Unit produces an annual marketing plan for the osteopathic clinical provision in Mill Court (Oxford) and Ferndale (Swindon) and supports the strategic and operational objectives within the School. The implementation of previous plans has led to levels of interest and use of both clinical facilities which provide income towards the overall resource allocation within osteopathy. Two members of the osteopathy team have also carried out a project to investigate public awareness of osteopathy focusing on the perceptions of osteopathic assessments, interventions and issues related to socio-economic demographics. The findings from the project were incorporated into the marketing plan and demonstrate an effective operational approach to marketing.

Management and governance: the maintenance and enhancement of standards and quality

6. The School of Health and Social Care works within a rigorous quality assurance framework which provides support for the annual review and monitoring and implementation of quality developments for the osteopathy provision. At School level, the Director of Academic Quality and Development is responsible for the effectiveness of quality assurance

mechanisms. At module and programme level, external examiners, external clinical assessors and students contribute to programme evaluation. This feeds into the School's Annual Review. Where areas for improvement are identified, the programme team takes the necessary actions. Effective approaches to reporting structures and the collation and dissemination of quality assurance matters add rigour to the MOst programme planning. Several feedback routes contribute to the monitoring and enhancement of osteopathic provision. Within the BOst programme, the external examiners' reports, feedback from external clinical assessors and student evaluations are given due consideration, and identified areas for improvement or enhancement are addressed. These procedures will be applied to the MOst programme.

7. External scrutiny of the MOst programme will be undertaken by an appointed external examiner and GOsC through the School's Annual Monitoring report. The School's clear and planned approach to responding to previous QAA/GOsC reviews is expected to continue for the MOst. The preparation of supervisors and external assessors is effective, with a series of planned sessions incorporating video feedback techniques, problem-based learning approaches and a mentoring system.

8. The School manages its provision within the regulatory framework of the University and within its organisational governance, financial control and quality assurance arrangements. It has an effective system of internal and external monitoring and a robust process for dissemination and development in response to feedback received. The effectiveness of these systems is demonstrated by the full responses made to the Initial Recognition Review. There is an effective approach to the planning of the MOst programme and a rigorous mechanism to respond to stakeholder feedback on the existing BOst provision. This mechanism will remain in operation for the delivery of the MOst.

9. The self-evaluation document focused primarily on the results of the Initial Recognition Review and provided a response outlining the developments that have taken place in preparation for the MOst programme launch. Further documentation provided during the review, in response to requests for clarification, and the production of supporting evidence demonstrates an effective and collaborative team approach, with the ability to present accessible data in a clear and focused manner.

An evaluation of the clinical and academic standards achieved

Intended learning outcomes

10. The Initial Recognition Report for the BOst and MOst programmes recorded that the intended learning outcomes were set at an appropriate level and mapped closely to *Standard 2000*, and that the curricula demonstrated progression through the levels. It also concluded

that the curricula were current and informed by professional practice and well designed to enable students to achieve the intended learning outcomes, and that assessment methods were clearly linked to intended learning outcomes and set at the appropriate level.

11. The intended learning outcomes for the MOst programme remain unchanged since the Initial Recognition and they match the stated programme aims. Intended learning outcomes for individual modules are presented in the module outlines of the programme handbook and are well articulated. They are consistent with Masters level study, as set out in the *Framework for Higher Education Qualifications*, and with the characteristics of Masters level study in osteopathy, set out in the *Subject Benchmark Statement for Osteopathy*. All module intended learning outcomes are well documented and clearly mapped against the General Osteopathic Council *Standard 2000* and scrutiny of this mapping confirms that intended learning outcomes comprehensively address the capabilities set out therein. The module outlines also clearly show where and how intended learning outcomes are learned, practised and assessed.

Curricula

12. The curriculum is outlined in the Programme Specification and shown in diagrammatic form in the Student Handbook together with detailed module specifications. Transferable skills are embedded in all four years of the programme, with inter-professional learning also represented at all levels.

13. The key enhancements in the MOst programme, when compared with the BOst, are a greater emphasis on the research base of osteopathy, the inclusion of electives in specialised areas of practice, and a greater emphasis on evidence-based and critical evaluation of clinical encounters. Module leaders and clinical teachers capable of delivering these enhancements are being identified in readiness for the commencement of the programme. The organisation of the curriculum over four years, provides a clear progressive experience, with appropriate Masters level content at the latter stages. Both the BOst and MOst programmes fulfil the requirements of *Standard 2000*.

14. The report of the Initial Recognition Review recommended wider staff involvement in curriculum development, and this has been addressed. Staff roles, responsibilities and collaborative activities are outlined in the self-evaluation. The programme team has been enlarged and involved in curriculum development, including preparation of the self evaluation document and further development of module descriptors, which is continuing.

15. It is stated in the Clinic Modelling Rationale that 'the hourly requirement (for clinical training) on the part-time BSc (Hons) Osteopathy programme is 1200 hours with 1000 hours required on the full-time programme(s)'. This apparent discrepancy was explored with

members of the programme team who confirmed that experience of part-time students has shown that these students in fact achieve the Standard of Proficiency after approximately 1000 hours of clinical education. The expectation therefore is, that the improved continuity of clinical education/training of full-time students will mean that they achieve the Standard of Proficiency in no more than 1000 hours.

Assessment

16. The assessment strategy is well designed and clearly documented. It incorporates both formative and summative forms of assessment to assist students in developing their intellectual, practical and clinical skills. It is also designed to encourage students to reflect on their learning through the use of a personal journal and work in one-to-one tutorials and in group tutorials. The intended assessment procedures are well matched to the aims and intended learning outcomes of the programme and range from written essays to Objective Structured Practical Examinations to Patient Evaluation and Management Problems. Extensive and clear details of these different assessment methods are given to the students.

17. The Student handbook gives clear information about the timings and weightings of the assessment schedule. The stated assessment criteria will enable internal and external examiners to distinguish between different levels of achievement and enable students to understand what is required for each assessment. The link between the intended learning outcomes, the *Standard 2000* capabilities and the assessments is also clearly stated in the Student Handbook. This will ensure the assessment procedures effectively and appropriately measure the achievements of the programme's ILOs.

18. The University appointed an external examiner to the School in 2007-08 with a four-year tenure, which will encompass the graduation of the first MOst cohort. Some external assessors for the Osteopathic Clinical Performance Assessment are still to be appointed, those already in post have the appropriate level of experience. They are being given in-school training which is still continuing.

19. Most assessment in the final year is at Masters level, including a triple weighted dissertation module. Assessment of the dissertation will be carried out by staff qualified at Masters level. It is planned that students will work on collaborative research projects within the School, which is an appropriate approach, reflecting the aims of the programme.

Student achievement

20. As with assessment, there is no direct evidence relating to achievement. All 20 of the 2007-08 intake to the BOst programme progressed satisfactorily to the second year. Several of these students have declared an interest in transferring to the MOst programme. The

Programme Specification states that an average mark of 60 per cent must be achieved in year two compulsory modules in order to transfer.

21. Intended learning outcomes are formulated to reflect Masters level achievement. Final awards will be graded, with students gaining 70 per cent and above being awarded MOst with Distinction and those achieving 65 to 69 per cent being awarded MOst with Merit.

The quality of the learning opportunities provided

Teaching and learning

22. The Programme Specification describes the teaching and learning strategy. This involves the assimilation of osteopathic skills and knowledge, which are then applied in a number of diverse settings. Students will add new skills and knowledge through the application of a range of approaches including self-directed study, reflective learning and problem based learning. Problem based learning is employed to integrate learning across modules throughout the programme and it has been a feature of the part-time BSc (Ost) programme since its inception. Two members of the programme team have extensive experience of this approach to teaching and learning, one of whom has presented conference papers on the subject and presents staff development sessions at the University. Other members of the teaching team also have increasing problem based learning experience.

23. Expectations of student attainment at the commencement of the MOst programme, after two years of the BOst programme, are at an appropriate level. Once they join the MOst, students will move from experiencing familiar problems and situations within a clinical setting, to being exposed to unfamiliar problems in unfamiliar contexts. It is intended that this will take place primarily in specialist teaching clinics under the supervision, and with the support of, suitably qualified staff.

Student progression

24. Student progression and completion criteria are clearly stated in the Student Handbook. To progress to the final year of the MOst programme, students must pass all modules in the penultimate year. This includes one Masters level module, Advanced Research Design, which has a higher pass mark than the other modules, which are of undergraduate level.

25. All full-time osteopathic students enrol initially on the BOst programme. Students are given clear documented information regarding the possible transfer from the BOst to the MOst programme both before enrolment and during the first two years of study. At the time of the review, which was before the second year examinations, seven students out of the 19 in the second year of the BOst programme, had expressed an interest in progressing on to the

MOst programme. Student progression through the BOst has been good, with only one student out of an initial cohort of twenty not progressing. Students who have expressed an interest in transferring to the MOst programme have undertaken the third-year undergraduate Research Methods module. This is an appropriate way in which to ease progression to Masters level study.

26. A wide range of support services will be available to MOst students to facilitate student progression. These range from personal development planning and the use of the School's libraries and audio visual aids, through to support from individual personal tutors. These support services currently work effectively for the BOst.

27. If a student fails parts of the MOst it will be possible for him/her to transfer back to the BOst subject to the approval of the Osteopathy Programme Committee. Depending upon which module of the MOst the student fails (s)he will have to pass other BOst modules to be accepted back, these arrangements are clearly detailed.

28. Overall, the quality of the written guidance on progression and support provided to the students is of a very high standard. It is consistent with the aims of the programme and is considered a strength by the visitors.

Learning resources

29. It was a condition of the Initial Recognition Review that the University establish a funded osteopathic research centre. The School made an appropriate response to this condition by choosing to establish osteopathy as a theme in the Rehabilitation and Enablement Research Group. This was done to avoid osteopathic research becoming isolated, and to facilitate interdisciplinary research collaboration and make use of established links with outside collaborators. The research strategy is realistic; it aims to consolidate research within the School by ensuring sustainability, capability among research active staff and the raising of standards of research. Visitors explored with staff the long-term commitment of the School of Health and Social Care to osteopathic research remaining embedded in the work of the Rehabilitation and Enablement Research Group. They were informed that there was a commitment to enhancing multidisciplinary PhD level research and that it was intended to strengthen the role of osteopathy within this. This is supported by the fact that osteopathy students will form the second largest student body within the School by 2012. The culture of osteopathic research now needs to be embedded in the School to support the development of the MOst programme.

30. A further condition of the Initial Recognition of the programme required MOst dissertation supervisors to have a minimum of a Masters degree or equivalent and some experience of research and teaching at Masters level. The School has adopted a strategy of reducing the

reliance on part-time lecturers in favour of a smaller number of permanent lecturers and senior lecturers, combined with raising the level of qualifications to a minimum of Masters level and developing the research capability of the Osteopathy team. Funding for an additional 1.0 FTE staff member is assured for the 2009-10 academic year.

31. Four members of the programme teaching team for the MOst currently hold Masters level awards with a further ten currently undertaking Masters level study, mostly supported by the University. In addition, 32 practising osteopaths are engaged as clinical tutors. The need for diversity of clinical experience for students is recognised and to this end it is intended to maintain the current number of clinic tutors. The School is beginning to involve recently qualified alumni from the BSc (Ost) programme. The University is now identifying clinical teaching staff capable of supporting students at Masters level, including supporting student clinical learning in specialised areas of practice.

32. Five teachers from the existing BOst programme, together with a further seven staff members within the School of Health and Social Care are currently research-active. The School Staff Development Committee meets monthly to consider staff development needs and has a clear line of communication with University authorities to promote staff development, including the further development of research capability in current and proposed future staff members. Examples of this are the osteopathic research workshops which indicate strong engagement by members of the teaching team in acquiring and enhancing research capability, and Faculty Development Days involving both academic and clinical teachers. Staff development is also supported by the University's Oxford Centre for Staff and Learning Development. Academic staff with teaching responsibility for inter-professional modules are also involved in the delivery of some non-specialist modules in the MOst programme, contributing to cross-professional collaboration.

33. The Initial Recognition Review included a condition that the University continues to produce a marketing plan for the clinic provision and to monitor patient numbers closely. The University has addressed this with plans to increase clinic facilities at Ferndale campus, Swindon and at Mill Court in Oxford. Projections for patient numbers have been made and have confirmed that sufficient clinic accommodation at both sites exists, and that future clinical teaching staff numbers will support this expansion. The University has evaluated the strengths and challenges to the sustainability and growth of clinical teaching, and linked this to a comprehensive marketing plan and projections for clinic accommodation needs. Marketing activities at both sites are reported to have fulfilled or exceeded targets.

34. Library and computing facilities are clearly described in the Student Handbook which indicates well-established collaboration and inter-library loan facilities, and IT support services. Visitors were informed that clinic library facilities including standard osteopathic

texts at Ferndale and broadly comparable with the Mill Court Clinic provision, with the advantage of interdisciplinary contact within the clinical environment.

35. Accommodation for research elements of the programme is based in state-of-the-art biomechanics, human performance and movement science laboratories. The Initial Recognition Review identified problems of access to Mill Court Clinic for people with physical disabilities. This issue has been addressed through the provision of ramps.

36. Procedures for the allocation of students to work in both clinics, consistent with University-wide procedures, take account of transport considerations and students' place of domicile. The allocation of patients to students in the clinics is monitored and managed by a manual mapping system which is in the process of being transferred to an electronic system once this has been fully tested.

37. The University's Annual Reports to GOsC for 2006-07 and 2007-08 show the percentage of clinic patients under the age of 16 to be very low. Staff have identified this problem, and a marketing strategy aimed at increasing the number of infants and children is being planned in association with the University Central Marketing Unit in preparation for the paediatrics elective in the final year.

38. The programme is based at the Marston Road site of the Headington Campus, which houses a range of health-related programmes. The site has been subject to extensive refurbishment which continues. Teaching accommodation is of good quality and is well-matched to the needs of the programme.

Meetings and documentation

Major documentation

SED and appendices – MOst - OBU

Programme Specification – MOst – OBU

MOst Student Course Handbook 2006 - OBU

Osteopathy Research Workshops document, attendance lists, programmes & teaching/learning materials - OBU

Framework for Higher Education Qualifications in England, Wales and Northern Ireland – QAA (FHEQ)

Subject Benchmark Statement – Osteopathy – QAA

Standard of Proficiency – Standard 2000 ('S2K') – General Osteopathic Council

GOsC RQ Annual Report 2006/7

GOsC RQ Annual Report 2007/8

School of Health and Social Care Staff Development Committee minutes & applications for support to attend staff development activities

Tabled programme staff list and list of research-active School staff

Strategy documents

Research Plan

OBU 09 Postgraduate Prospectus

Postgraduate Supervision Course Leaflet

OBU Osteopathy Leaflet

Progression to MOst leaflet

OBU lecture notes / power point presentation

Osteopathy Awareness Survey 2009

Meetings held

Meeting with staff to discuss academic standards

Meeting with staff to discuss learning opportunities

Meeting with staff to discuss management and strategic issues

Clarification Meeting